

Work Order ID 90183

September-13-12 2:50:18 PM

90183

Page 1

Item ID: D3636-041 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Shoulder Harness
 Start Date: 9/12/12 Start Qty: 8.00 ***8*** Cust Item ID:
 Required Date: 10/12/12 Req'd Qty: 8.00 ***8*** Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 12-09-17 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3636	Rev B								
100	PURCHASING	0.00							
100									
Purchasing	Memo	0.00							
Purchasing	Issue P/O: <u>17920</u>								
	Purchase Part Number: P/N 3104-1-061-2396				Supplier:				
	AMSAFE INC., PHOENIX, ARIZONA								
	Certificate of conformity is required								
110	Receive & Inspect for Damage & Mat'l Certs	0.00							
110									
Packaging	Memo	0.00							
Packaging	Ensure certificate of conformity is attached								
120	QC6- Inspect dimensions to drawing	0.00							
120									
QC	Memo	0.00							
Quality Control									

CA 12/09/17 (8)

12/12/12 (8)

(8)

AS 16 17/10/01

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

September-13-12 2:50:18 PM

Item ID: D3636-041

Accept

N900040100

Setup Start *NS1*

Revision ID:

Item Name: Shoulder Harness

Stop *NS2*

Start Date: 9/12/12 **Start Qty:** 8.00

8

Cust Item ID:

Required Date: 10/12/12 **Req'd Qty:** 8.00

8

Customer:

Reference:

Approvals: _____ **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Run Start *NR1*

QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____

Stop *NR2*

Sequence ID/
Work Center ID

Operation Description

Set Up/ Run Hours

Tool ID

Tool #

Plan Code

**Accept
Qty**

Reject
QtyReject
Number

**Insp.
Stamp**

130

Identify as per dwg & Stock Location:_____

0.00

130

Packaging

Memo

57267

0.00

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

12/10/30

MF
121000

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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Picklist Print

September-13-12 2:50:18 PM

Page 1

Work Order ID: 90183

Parent Item: D3636-041

Parent Item Name: Shoulder Harness

Start Date: 9/12/12

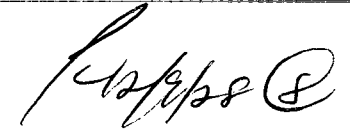
Required Date: 10/12/12

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP Rev:A revA as per dwg 08-01-09 DD verified by LL 08/01/09

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3636-041P Shoulder Harness		Purchased	No			110	Each	0.0000	1	8			



NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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Equip/Tooling <input type="checkbox"/>												
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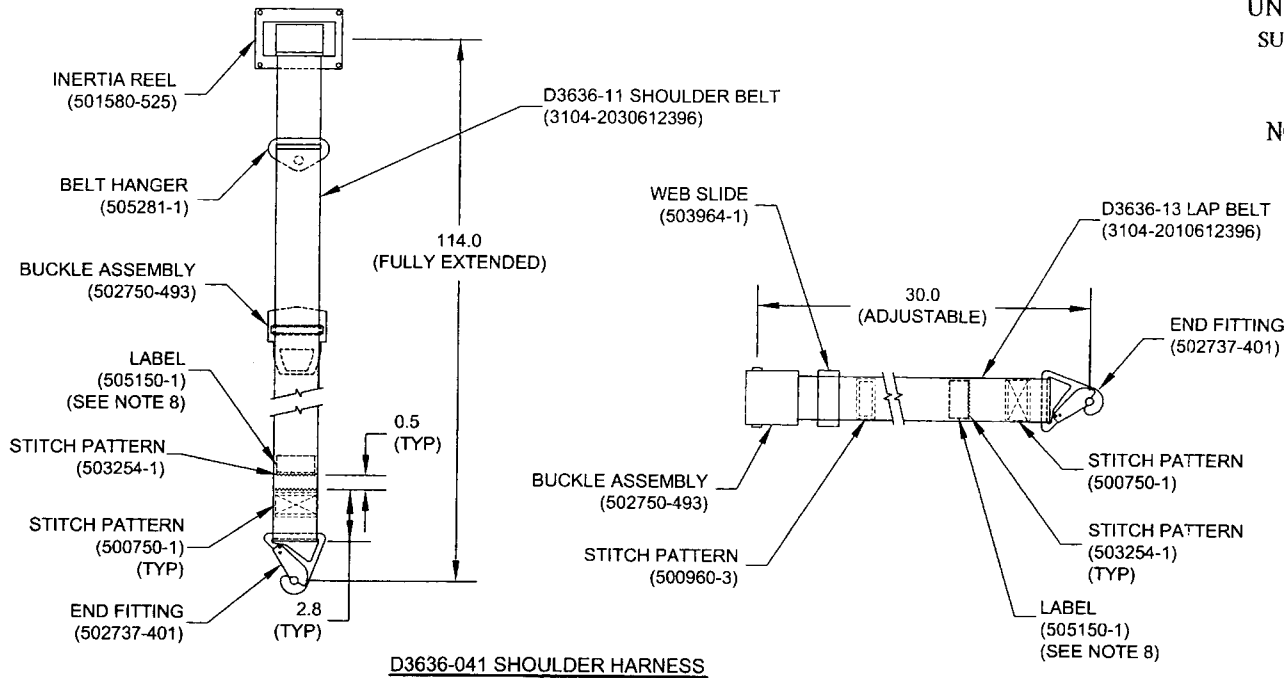
SPECIFICATION CONTROL DRAWING

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENTS

WITH NO NOTICE

WORK ORDER

NO. 90183 MCT
12-09-17



NOTES:

- DESCRIPTION: 3-POINT SHOULDER HARNESS WITH LEVER STYLE BUCKLE AND CHROME HARDWARE PLATING
2" BLACK NYLON WEBBING, STYLE T1200-5 WHICH MEETS REQUIREMENTS OF TSO-C114
WITH MINIMUM STRENGTH OF 2500 LBS
- PURCHASE INFO: P/N 3104-1-061-2396 (D3636-041)
AMSAFE INC., PHOENIX, ARIZONA
- TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- UNITS: INCHES UNLESS OTHERWISE NOTED
- BREAK SHARP EDGES: N/A
- IDENTIFICATION: N/A
- WEIGHT: 1.7 lbs
- LABEL TO INCLUDE: DART AEROSPACE P/N D3636-11/-13
(613) 632-3336

RELEASED
07.10.16

B	NEW HARNESS P/N'S; REFERENCE TSO-C114	LE	07.10.16
A	NEW ISSUE; REPLACES G10601	LE	07.07.27
REV.	DESCRIPTION	BY	DATE
DESIGN	CV	DART AEROSPACE USA, INC PORT HADLOCK, WA	
DRAWN	LE		
CHECKED	PH	DRAWING NO.	REV. B
MFG. APPR.	N/A	D3636	SHEET 1 OF 1
APPROVED	PH	TITLE	SCALE
DE APPR.	PH	SHOULDER HARNESS	NTS
DATE	07.10.16	COPYRIGHT © 2007 BY DART AEROSPACE USA, INC THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMERCE, NOR IS IT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.	



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO17920

Purchase Order Date 9/17/12

PO Print Date 9/17/12

Page Number 2 of 2

Order From :

VU-AMS001

AMSAFE INC.
LOCKBOX #911928
P.O. BOX 31001-1928

PASADENA, CA 91110-1928
US

Contact Name		Buyer	Chantal Lavoie
Vendor Phone	602 850 2850	Requisition Nbr	
Vendor Fax	602 850 2812	Tax Resale Nbr	10127-2607
Vendor Account Nbr		Terms	Net 30
		Currency	USD
		FOB	Destination-Collect

4	4192-1-021-2396	Harness Assembly	10/05/12	4.00	FedEx PI collect	\$241.4000 ✓	\$965.60
			Yes	Each			

Special Inst: AS PER DWG D4387 REV. C
B89947
AMSAFE P/N: 4192-1-021-2396

5	D3636-041P	Shoulder Harness	10/05/12	8.00	FedEx PI collect	\$318.2900 ✓	\$2,546.32
			Yes	Each			

Special Inst: AS PER DWG D3636 REV. B
B90183
AMSAFE P/N: 3104-1-061-2396

12/9/28

PO Total:

\$8,617.86

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

Change Nbr:

2

Change Date: 9/17/12

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required - YES NO

AmSafe

PHOENIX, AZ 85043
PH (602)850-2850 FAX (602)850-2812



CUSTOMER NO.
10006113

SALES ORDER NO.
S241083

BOL NO.
000279368

DATE PRINTED
09/27/12

PAGE NO
1

DART AEROSPACE
1270 ABERDEEN STREET
HAWKESBURY
HAWKESBURY, ON K6A 1K7
Canada

DART AEROSPACE LTD.
1270 ABERDEEN ST
HAWKSBURY,, ON K6A 1K7
Canada

CUSTOMER ORDER NO.
PO17920

TERMS
NET30

FREIGHT
COLLECT

SHIP VIA
FedEx P1 10:30 AM

F.O.B.
ORIGIN

Ship to ID: 10006125

Sales Order Remarks: 1517-9324-0
Remarks:

SHIPMENT REFERENCE 000279368

LINE	ITEM NUMBER / DESCRIPTION	DRAWING AND CERTIFICATIONS	DUE DATE	QTY ORDERED	QTY SHIPPED	QTY BACK ORDERED
5	Cust. Item No.: D3636041 3104-1-061-2396 REST SYS ASSY	DRAWING: 3104 REV: G CERT: TSO-C114 Lot/Serial Numbers Shipped Quantity S241083-5	2012-10-03 8.0	8 Expire Ref.	8	0

I certify that the article(s) listed above conform to all applicable design data, and (as applicable):
FAA PMA, FMVSS 209, FMVSS 302, 14 CFR 25.853
FAA TSO C22f, C22g, C114 or TSO Plus

The conditions and tests required for TSO approval of the article(s) are minimum performance standards. It is the responsibility of those installing the article(s) either on or within a specific type or class of aircraft to determine that the aircraft installation conditions are within the standards applicable to the TSO article including (when applicable) the integrated non-TSO function. The non-TSO function is described as the seat belt airbag system including the inflator cable assembly and electrical components that have not been evaluated for functionality or installation requirements. TSO articles including the integrated non-TSO function must have separate approval for installation in an aircraft. The article(s) may be installed only if performed under 14 CFR part 43 or the applicable airworthiness requirements. Product shipped meets all material, processing and test requirements. Certifications/Test reports as applicable are retained on file at AmSafe Aviation.

AmSafe Authorized Signature: X

Printed Name:

Dated:

1. Approving National Aviation Authority/Country: FAA/United States		2. AUTHORIZED RELEASE CERTIFICATE FAA Form 8130-3, AIRWORTHINESS APPROVAL TAG				3. Form Tracking Number: 3241083-51A	
4. Organization Name and Address: AmSafe Aviation 1043 North 47th Avenue Phoenix, Arizona 85043		Cert. No. PT1967NM				5. Work order/Contract/Invoice Number: S241083 - 5 PAGES ATTACHED	
6. Item:	7. Description:	8. Part Number:	9. Eligibility: *	10. Quantity:	11. Serial/Batch Number:	12. Status/Work:	
1	REST SYS ASSY	3104-1-061-2396	N/A	8	A0912	NEW	
13. Remarks: Drawing: 3104 Rev: G TSO: TSO-C114 17/10/01 Cust P/N: D363604 EXPORT AIRWORTHINESS APPROVAL: THIS ARTICLE MEETS THE SPECIAL REQUIREMENTS OF CANADA							
14. Certifies the items identified above were manufactured in conformity to: <input checked="" type="checkbox"/> Approved design data and are in a condition for safe operation <input type="checkbox"/> Non-approved design data specified in Block 13.				19. <input type="checkbox"/> 14 CFR 43.9 Return to Service <input type="checkbox"/> Other regulation specified in Block 13 Certifies that unless otherwise specified in Block 13, the work identified in Block 12 and described in Block 13 was accomplished in accordance with Title 14, Code of Federal Regulations, part 43 and in respect to that work, the items are approved for return to service.			
15. Authorized Signature: <i>Nellie Alvarado</i>		16. Approval/Authorization No.: ODA602112NM		20. Authorized Signature		21. Authorized/Certificate No.	
17. Name (typed or printed) Nellie Alvarado		18. Date (m/d/y): SEP/26/2012		22. Names (typed or printed)		23. Date (m/d/y):	
User/Installer Responsibilities							
<p>It is important to understand that the existence of this document alone does not automatically constitute authority to install the part/component/assembly. Where the user/installer performs work in accordance with the national regulations of an airworthiness authority different than the airworthiness authority of the country specified in Block 1, it is essential that the user/installer ensures that his/her airworthiness authority accepts parts/compenents/assemblies from the airworthiness authority of the country specified in Block 1.</p> <p>Statements in Blocks 14 and 19 do not constitute installation certification. In all cases, aircraft maintenance records must contain an installation certification issued in accordance with the national regulations by the user/installer before the aircraft may be flown.</p>							